**Eötvös Loránd University**

**Faculty of Informatics**

Contact: okt\_asszisztens@inf.elte.hu

DECLARATION OF ACCEPTANCE FOR INTERNSHIP (STUDENTS UNION FORM)

# *This declaration of acceptance confirms that the student of Computer Science BSc studies at ELTE Faculty of Informatics can complete the mandatory 320 hours internship specified in the training and graduation requirements of the program at the chosen organization within the framework detailed below.*

**The internship can be started after the approval of this declaration by the Faculty!**

**FROM JANUARY 1, 2024 THIS DECLARATION CANNOT BE SUBMITTED WITH ANY DELAY!**

**ANY WORK WHICH WAS STARTED WITHOUT THE PRELIMINARY APPROVAL OF THE UNIVERSITY,**

**WILL NOT BE RECOGNIZED AS INTERNSHIP ACCOMPLISHMENT!**

1. **Information about the student**

Student’s name:       Starting year of studies:

Neptun code:

Phone number:      E-mail:

1. **Information about the employing organization and the Students Union**

|  |  |  |
| --- | --- | --- |
| **Information** | Company | Students Union |
| Name |  |  |
| Address |  |  |
| Web |  |  |
| **Contact name** |  |  |
| Department |  |  |
| Position |  |  |
| Phone number |  |  |
| E-mail |  |  |
| **Supervisor’s name** |  |  |
| Department |  |
| Position |  |
| Phone number |  |
| E-mail |  |

1. **Information about the internship**

Internship starts:      ends:

**duration: …….. weeks**  **schedule: ……. hours/week total: ……..… hours**

Department name:

Professional work to be performed by the student (in details):

1. **Statement**

In the name of the employing organization I agree, that      (student’s name) will carry out his/her internship along the conditions detailed above and defined in the cooperation agreement between the organization and the Students Union.

The above organization

[ ]  can be

[ ]  cannot be

listed on the website of ELTE Faculty of Informatics (www.inf.elte.hu) among the organizations employing interns.\*

\*Please, mark your choice. In the absence of approval the organization's data will not be published on our website.

Please note that we publish on our website only the data of organizations having a cooperation agreement **with the Faculty** for a period of at least 1 year for at least 5 students.

1. **Submission of the Reference Letter**

The student has to submit the Reference Letter (certification of completion his/her internship) **within 30 days after finishing the internship period**. If the student does not fulfill his/her obligation to submit the Reference Letter by the deadline, the Office of Educational Affairs is entitled to impose a new service fee every week after the deadline. The service fee is 3000 HUF/week.

1. **Signatures**

**Employing organization**

**Electronic signature** of the contact person or the professional supervisor, or their **signature with blue ink plus a seal**.

|  |  |
| --- | --- |
| **Date:**       | **Readable name:**       |
|  | **Signature:**       |
|  | **Seal:**       |

**Students Union**

From the behalf of the Students Union I declare that the Students Union concludes the **cooperation agreement** with the employing organization.

|  |  |
| --- | --- |
| **Date:**       | **Readable name:**       |
|  | **Signature:**       |
|  | **Seal:**       |

After signing, please send this document to okt\_asszisztens@inf.elte.hu

This document will be returned to the employing organization containing the decision of the Vice-Dean for Education.

|  |  |
| --- | --- |
| **On behalf of ELTE Faculty of Informatics I approve completing the internship with the above conditions.** | date:**Vice-Dean for Education** |
| **I do not approve completing the internship. Reason: LACK OF ACCEPTABLE PROFESSIONAL TASKS** | date:**Vice-Dean for Education** |
| **I do not approve completing the internship. Reason: LATE SUBMISSION OF THE DECLARATION** | date:**Vice-Dean for Education** |